2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P98000022117

- 1. Entity Name
- J. CAREY PROPERTIES, INC.



Principal Place of Business

Mailing Address

200 N DENNINIG DR STE 2 200 N DENNING DR

STE 2

WINTER PARK, FL 32789-3762

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FILED Apr 30, 2007 8:00 am Secretary of State

04-30-2007 90400 019 ***150.00



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04142007 No Chg-P CR2E034 (11/05)

4. FEI Number 59-3499015

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

407-644-3242

6.	Name	and Address	of Current Re	gistered Agent
	6.	6. Name	6. Name and Address	6. Name and Address of Current Re

CAREY, JUDI A 1122 AYRSHIRE ST ORLANDO, FL 32803

SIGNATURE:

DO NOT WRITE IN THIS SPACE

a. The above named entity submits this statement for the purpose of changing its registered office of registered agent, or both, in the State of Horida. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE	Signature, fyped or printed name of registered agent and title i	if applicable. (NOTE: Registered	Agent signature required when reinstating)	DATE			
	E NOWIII FEE IS \$150.00 by 1, 2007 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing \$5.00 May Be				
10.	OFFICERS AND DIRECT	CTORS		······································			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P CAREY, JUDI A 1122 AYRSHIRE ST ORLANDO, FL 32803						
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T JANETTE, JENNIFER M 726 WILKINSON STREET ORLANDO, FL 32803						
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
TITLE NAME STREET ADDRESS CITY-ST-ZIP							
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119. Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							

President

MG OFFICER OR DIRECTOR